

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

HOLLA et al.

Examiner: Susannah E. Lee

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Art Unit: 1626

DEC 05 2005

Application No.: 10/789,053

Filed: February 27, 2004

Title:

**PROCESS FOR PREPARING THE
ENANTIOMERIC FORMS OF CIS-
CONFIGURED 1,3-
CYCLOHEXANEDIOL DERIVATIVES****TELEFAX CERTIFICATE**I hereby certify that this correspondence is being
transmitted via facsimile to the Commissioner for
Patents, Alexandria, VA 22313, on**December 5, 2005**

Date of Transmission

Ginnie Walker
Signature Ginnie Walker**RESPONSE AND AMENDMENT PURSUANT TO 1.111**Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

This is in response to the Office Action mailed 07/05/2005. The following claim set replaces
all prior versions of the claims. Remarks follow on page 25.

12/06/2005 AKELECH1 00000077 181982 10789053

01 FC:1201	200.00 DA
02 FC:1202	1900.00 DA
03 FC:1203	360.00 DA

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Certificate of Mailing or Transmission	
I hereby certify that this correspondence is being transmitted via fax to the Commissioner for Patents, Alexandria, VA 22313 on <u>12-5-2005</u>	
Date of Deposit	<u>12-5-2005</u>
Printed Name of Person Signing Certificate <u>Barbara E. Kurys</u>	
Signature	<u>Barbara E. Kurys</u>

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Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below.

(1)	(2) CLAIMS REMAINING AFTER AMENDMENT*	(3)	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR** / ***	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	58	MINUS	20	38	50.00	1900.00
INDEPENDENT CLAIMS	4	MINUS	3	1	200.00	200.00
MULTI-DEPENDENT CLAIMS(S), Per Application (360.00)						360.00
TOTAL AMENDMENT FEE FOR THIS AMENDMENT →						2460.00

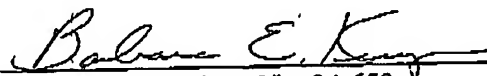
* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" in Total Claims is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" in (Independent Claims) is less than 3, write "3" in this space.

The Commissioner is hereby authorized to charge any fees under 37 C.F.R. 1.16 which may be required by this paper or credit any overpayment to Account No. 18-1982. Two duplicate copies of this paper are enclosed.

Respectfully submitted,


Barbara E. Kurys, Reg. No. 34,650
Attorney/Agent for Applicant

Aventis Pharmaceuticals Inc.
(a member of the sanofi-aventis group)
U.S. Patent Operations
Route #202-206 / P.O. Box 6800
Bridgewater, New Jersey 08807-0800
Telephone (908) 231-2965
Telefax (908) 231-2626

Aventis Docket No. DEAY2003/0014 US NP

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